

UNITED STATES BANKRUPTCY COURT

EASTERN DISTRICT OF NEW YORK

REGION 2

In re: VEGA Medical Professionals, LLC

§

Case No. 18-71765

§

Lead Case No. 18-71748

§

Debtor(s)

Jointly Administered

Post-confirmation Report

Chapter 11

Quarter Ending Date: 06/30/2021

Petition Date: 03/16/2018

Plan Confirmed Date: 02/26/2019

Plan Effective Date: 03/01/2019

This Post-confirmation Report relates to: Reorganized Debtor

Other Authorized Party or Entity: Howard M. Ehrenberg, Liquidating Tee

Name of Authorized Party or Entity

/s/Christopher R. Belmonte

Signature of Responsible Party

07/21/2021

Date

C.R. Belmonte, Counsel to Liquidating Trustee

Printed Name of Responsible Party

Duane Morris LLP

230 Park Avenue

New York, N.Y. 10169

Address

STATEMENT: This Periodic Report is associated with an open bankruptcy case; therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.

Debtor's Name VEGA Medical Professionals, LLC

Case No. 18-71765

Part 1: Summary of Post-confirmation Transfers

	Current Quarter	Total Since Effective Date
a. Total cash disbursements	\$0	\$0
b. Non-cash securities transferred	\$0	\$0
c. Other non-cash property transferred	\$0	\$0
d. Total transferred (a+b+c)	\$0	\$0

Part 2: Preconfirmation Professional Fees and Expenses

a.	Professional fees & expenses (bankruptcy) incurred by or on behalf of the debtor	Aggregate Total	Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
			Itemized Breakdown by Firm			
i	Firm Name	Role				
i			\$0	\$0	\$0	\$0
ii			\$0	\$0	\$0	\$0

b.	Professional fees & expenses (nonbankruptcy) incurred by or on behalf of the debtor	Aggregate Total	Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
			Itemized Breakdown by Firm			
i	Firm Name	Role				
i			\$0	\$0	\$0	\$0
ii			\$0	\$0	\$0	\$0

c. All professional fees and expenses (debtor & committees)

	Approved Current Quarter	Approved Cumulative	Paid Current Quarter	Paid Cumulative
All professional fees and expenses (debtor & committees)	\$0	\$0	\$0	\$0

Part 3: Recoveries of the Holders of Claims and Interests under Confirmed Plan

	Total Anticipated Payments Under Plan	Paid Current Quarter	Paid Cumulative	Allowed Claims	% Paid of Allowed Claims
a. Administrative claims	\$0	\$0	\$0	\$0	0%
b. Secured claims	\$0	\$0	\$0	\$0	0%
c. Priority claims	\$0	\$0	\$0	\$0	0%
d. General unsecured claims	\$0	\$0	\$0	\$0	0%
e. Equity interests	\$0	\$0	\$0	\$0	0%

Part 4: Questionnaire

a. Is this a final report?

Yes No

If yes, give date Final Decree was entered:

If no, give date when the application for Final Decree is anticipated: 10/21/2021

b. Are you current with quarterly U.S. Trustee fees as set forth under 28 U.S.C. § 1930?

Yes No

Debtor's Name VEGA Medical Professionals, LLC

Case No. 18-71765

Privacy Act Statement

28 U.S.C. § 589b authorizes the collection of this information and provision of this information is mandatory. The United States Trustee will use this information to calculate statutory fee assessments under 28 U.S.C. § 1930(a)(6) and to otherwise evaluate whether a reorganized chapter 11 debtor is performing as anticipated under a confirmed plan. Disclosure of this information may be to a bankruptcy trustee when the information is needed to perform the trustee's duties, or to the appropriate federal, state, local, regulatory, tribal, or foreign law enforcement agency when the information indicates a violation or potential violation of law. Other disclosures may be made for routine purposes. For a discussion of the types of routine disclosures that may be made, you may consult the Executive Office for United States Trustee's systems of records notice, UST-001, "Bankruptcy Case Files and Associated Records." See 71 Fed. Reg. 59,818 et seq. (Oct. 11, 2006). A copy of the notice may be obtained at the following link: http://www.justice.gov/ust/eo/rules_regulations/index.htm. Failure to provide this information could result in the dismissal or conversion of your bankruptcy case, or other action by the United States Trustee. 11 U.S.C. § 1112(b)(4)(F).

I declare under penalty of perjury that the foregoing Post-confirmation Report and its attachments, if any, are true and correct and that I have been authorized to sign this report.

/s/Howard M. Ehrenberg

Signature of Responsible Party

Liquidating Trustee

Title

Howard M. Ehrenberg

Printed Name of Responsible Party

07/20/2021

Date